

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: David A. Baucom

Customer No.: 23,444

Serial No.: 10/042,758

Group No.: 3723

Date Filed: 10/01/2002

For: Pneumatic Lift and Movement System
for Shelving

Examiner: Christopher M. Koehler

RESPONSE TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. Transmitted herewith is a Response to Office Action dated March 21, 2007 (4 pages).
2. Applicant is
 - ☒ a small entity.
 - ☐ other than a small entity

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.10)

I hereby certify that this correspondence is, on the date shown below, being deposited with sufficient postage as First Class Mail, in an envelope addressed to the following: Mail Stop Amendments, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: _____

Signature

Coco H. Betancourt

(type or print name of person certifying)

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

(complete, as applicable)

- ☐ Applicant petitions for an extension of time under 37 C.F.R. § 1.136 (fees: 37 C.F.R. § 1.17(a)(1)-(4) for the total number of months checked below:

Extension (months)	Fee <u>large entity</u>	Fee for <u>small entity</u>
<input type="checkbox"/> one month	\$ 120.00	\$ 60.00
<input type="checkbox"/> two months	\$ 450.00	\$ 225.00
<input type="checkbox"/> three months	\$ 1,020.00	\$ 510.00
<input type="checkbox"/> four months	\$ 1,590.00	\$ 795.00
<input type="checkbox"/> five months	\$ 2,160.00	\$ 1080.00

Fee: \$ _____ -0- _____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured. The fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.
- ☐ Extension fee due with this request \$ _____ -0- _____

OR

- ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-(d) has been calculated as shown below:

Claims Remaining After Amendment	Highest No. Previously Paid For	Extra Present	Rate	Added Fee
Total: 17	17	0	\$50/25	\$0.00
Independent: 3	3	0	\$200/100	\$0.00
First Presentation of Multiple Dependent Claims:			\$360/180	\$0.00
Total Additional Fees:				\$0.00

(complete (c) or (d), as applicable).

- ☒ No additional fee for claims is required.

OR

- ☐ Total additional fee for claims required \$ _____

FEE PAYMENT

5. ☐ Attached is our check in the sum of \$ _____.
- ☐ Attached is our check in the sum of \$ _____ for a petition to revive an application.
- ☐ Charge Account No. 50-0897(BAM001C/149614) the sum of \$ _____

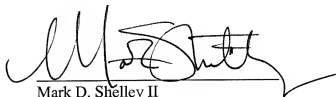
FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 50-0897
(BAM001C/149614)

AND/OR

- ☒ If any additional fee for claims is required, charge Account No. 50-0897
(BAM001C/149614)

Date: 20 April, 2007



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